PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10738822

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER SMALL E	
TOTAL CLAIMS			21					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			2\ minus 20=		* \			XS 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 = *					X43=		OR	X86=	
MU	LTIPLE DEPEN	DENT CLAIM PE	RESENT					+145=		OR	+290=	
* If	the difference	in column 1 is	ess than zero, enter "0" in colu			olumn 2	1	TOTAL		OR	TOTAL	77-5
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	OTHER SMALL E	
AMENDMENT A		CLAIMS		HIGH	IEST				ADDI-			ADDI-
		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
1	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDEN	CLAIM			+145=		OR	+290=	,
								TOTAL ADDIT, FEE	<u> </u>	OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								ADDIT: I'EE		•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
Ľ	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDEN	T CLAIM		j	+145=		OR	+290=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)	_	ADDITITE		_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
lacksquare	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145= TOTAL		OR	TOTA	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	ADDIT. FEI	
	ii ine Highest Nu The Highest Nur	imber Previously Pa nber Previously Pa	ad For* (Total o	or Indepen	dent) is th	e highest numb	er fo	ound in the ap	propriate bo	ox in c	olumn 1	